

# Resignation Request Form (ลาออก)

Day.....Month.....Year.....

Subject : Resignation Request

To : Vice President of Academic Affairs

Name ..... Student ID number .....

**Level of Education** ☐ Bachelor ☐ Diploma ☐ Master's ☐ Doctorate ☐ Short course

**Class Session** ☐ Regular class ☐ Special class

College/Faculty ..... Major ..... Telephone .....

I would like to resign from the university due to .....

Therefore, I would like to inform you for your consideration and approval.

Sign ..... Student Date ...../...../.....

Please process the request according to the steps below	
<b>1. Advisor's Comment</b>	<b>2. Dean's Comment</b>
Sign ..... Date ...../...../.....	Sign ..... Date ...../...../.....
<b>3. Student Finance Department</b> (only for funded student)	<b>4. Learning Library</b> (check student library record)
Sign ..... Date ...../...../.....	Sign ..... Date ...../...../.....
<b>5. Registration &amp; Learning Measurement</b>	<b>6. Vice President of Academic Affairs / Representative</b>
<b>Student Services</b> Request has been Accepted. Date ...../...../..... Sign ..... Student Services Officer	Approved          Sign ..... Date ...../...../.....
<b>Records Department</b> Resignation has been successfully recorded. Date ...../...../..... Sign ..... Records Department Officer	
<b>7. Finance Department</b>	
<b>Check outstanding tuition fees</b> <input type="checkbox"/> No outstanding balance <input type="checkbox"/> There is an outstanding balance..... <input type="checkbox"/> Other .....  Sign ..... Finance Officer Date ...../...../.....	